



PATENT
Customer No. 22,852
Attorney Docket No. 1197-227

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)

Shaun Jordan et al.)

Application No.: 10/055,915)

Filed: January 28, 2002)

For: 5-HT_{1A} Receptor Subtype Agonist)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

REPLY TO OFFICE ACTION

In reply to the Office Action mailed September 23, 2003, the period for response having been extended to January 23, 2004 by a request for extension of one month and fee payment filed concurrently herewith, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims in this paper.

Remarks/Arguments follow the amendment sections of this paper.

Attachments to this amendment include: Declaration of Inventor T. Kikuchi

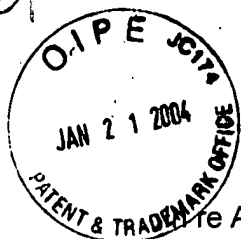
01/26/2004 EHAILE1 00000101 10055915

03 FC:1251

110.00 OP

01/26/2004 EHAILE1 00000101 10055915

01 FC:1202 504.00 OP
02 FC:1203 290.00 OP



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Re Application of:

Shaun Jordan et al.

Application No.: 10/055,915

Filed: January 28, 2002

For: 5-HT_{1A} Receptor Subtype Agonist

Group Art Unit: 1614

Examiner: Phyllis G. Spivack

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TECH CENTER 1600/2900

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

TRANSMITTAL LETTER

Enclosed is a reply to the Office Action of September 23, 2003. The item(s) checked below are appropriate:

- ☒ Applicant(s) hereby petition(s) for a one month(s) extension of time to respond to the above Office Action. The fee of \$110.00 for the Extension is enclosed.

The claims are calculated below:

	Claims Remaining After Amendment		Highest Number Previously Paid	Present Extra	Rate	Additional Fee
Total	Equivalent of 60	-	32	28	x \$ 18	\$ 504.00
Indep.	1	-	3		x \$ 86	
<input checked="" type="checkbox"/> First Presentation of Multiple Dep. Claim(s)					+\$290	290.00
Subtotal						\$ 794.00
Reduction by ½ if small entity						-
TOTAL						\$ 794.00

- ☒ A fee of \$794.00 to cover the cost of the additional claims added by this reply is enclosed.
- ☐ A fee of \$_____ to cover _____ is enclosed.
- ☒ A check for \$904.00 to cover the above fee(s) is enclosed.

Please grant any extensions of time required to enter this response and charge any additional required fees to our deposit account 06-0916.

Dated: January 21, 2004

By:

Arthur S. Garrett
Reg. No. 20,338